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# MALTBY URBAN DISTRICT COUNCIL



# ANNUAL REPORT

of the

Medical Officer of Health

for the Year 1957



#### MEMBERS OF THE PUBLIC HEALTH COMMITTEE

#### CHAIRMAN:

Councillor H. Cooke

VICE-CHAIRMAN:

Councillor F. Howe

#### COUNCILLORS:

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J. E. Beresford

H. Bulleyment

T. Cheetham

C. Edge

F. Jerram

J. Jowett

J. Layden

T. W. McLean

H. Nash

A. E. Sawyer

J. Tose

R. Tose

CHAIRMAN OF THE COUNCIL: Councillor C. Edge

CLERK OF THE COUNCIL: Mr. P. I. Warters

#### PUBLIC HEALTH DEPARTMENT STAFF:

MEDICAL OFFICER OF HEALTH;

Dr. J. M. Watt

SENIOR ASSISTANT MEDICAL OFFICER:

Dr. M. E. O'Neill

ASSISTANT COUNTY MEDICAL OFFICERS:

Dr. M. J. Hallinan

Dr. J. Lodwick

SENIOR PUBLIC HEALTH INSPECTOR:

Mr. R. Oddy

ADDITIONAL PUBLIC HEALTH INSPECTOR: Mr. M. Hepples

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## MALTBY URBAN DISTRICT COUNCIL ANNUAL REPORT 1957

#### COMMENTS

The records prove that Maltby has a young and increasing population, is enjoying a rising standard of living with improvements in feeding, clothing and housing, that its babies are surviving the dangers of their first year more successfully, that the school children are taller and heavier and that more and more people each year are attaining the age of sixty-five.

The lives of the people have been profoundly influenced by the health services which have reduced infectious diseases, have added to the comfort and security of elderly people, have given expert attention to the handicapped, safeguarded the mentally deficient, attended women in labour, given skilled nursing attention in the homes and taken part in medical research.

Some comments upon the intelligent use of these services may be helpful.

Expectant mothers should regularly attend for examination at the Council clinics or at the surgeries of their family doctors, so that any complications which may happen to develop during pregnancy can be detected in their earliest stages. The most frequent of these is toxaemia and this may require the mother's admission to hospital.

All expectant mothers should have their blood examined early in pregnancy and, if they are rhesus negative, should have another examination for antibodies at the thirty-fourth week. More than half the children born to mothers with a combination of these two conditions require a blood exchange.

Babies need a regular check at Infant Welfare Clinics to correct inadequate or excessive feeding and to remedy the numerous minor troubles which are always closely associated with immaturity.

One of the greatest puzzles encountered by young mothers is the long and complicated list of immunisations presented to them soon after their children are born. Fortunately the problem of attending the clinic for over a dozen injections is being simplified this year by a combined injection for whooping cough, diphtheria and tetanus and there is hope of further simplification in the future from a combination of four vaccines in one injection.

With all mothers polio vaccination, which is given from six months to school leaving age, is the most popular.

Whooping cough vaccination is a close runner-up in popularity; it is given from the first few weeks of life to four years of age.

B.C.G. vaccination against tuberculosis, given at thirteen years of age, also brings a very good acceptance rate.

There is a certain amount of apathy towards diphtheria immunisation because of the absence of this disease from the district for ten years and still less enthusiasm is shown for smallpox vaccination as smallpox has not shown itself in the area for over twenty years.

Some of the results from vaccination are seen in the disappearance of diphtheria and smallpox and in the reduction in the attack rate of whooping cough from 80 per cent to 30 per cent in infected families. The other vaccines have not been in use long enough to produce such obvious results, but there is every reason to expect that tetanus vaccine will bring a reduction in the 200 cases and 80 deaths from tetanus and render unnecessary the innumerable injections which have to be given in hospital casualty departments to all injured persons. Polio vaccine should also reduce the numbers of this crippling disease.

Mention may be made here of influenza vaccine, which was given to a selected group of doctors, nurses, ambulance drivers and home helps on a more or less experimental basis in November. If this vaccine is developed effectively it will outweigh all the others in its future importance.

Continuing with the subject of infectious disease and what the public can do in its prevention, food poisoning next deserves attention.

A much higher standard of personal hygiene is required among food handlers.

83 per cent of food poisoning is due to contamination of meat dishes.

In canteens and restaurants, to minimise the dangers of infection, reheated dishes should be avoided, stews should be cooked in small containers and gravy should be freshly prepared each day.

Another disease which could be prevented by a higher standard of hygiene is dysentery. This increasingly common diarrhoeal disease is spread by contact between one person and another. It is found on the hands of patients and carriers and on water-closet seats. The thorough washing of hands after using the toilet and better cleanliness of sanitary conveniences would cut down cases.

Tuberculosis is disappearing, but its complete elimination would be hastened by the more thorough tracing of carriers, particularly those among elderly people, who have the impression that it is a waste of time for them to attend mass-radiography sessions. There is nothing more tragic than a child dying from tuberculosis meningitis where the infection is traced to an elderly relative with a long standing cough who has never troubled to attend for an X-ray.

The risk of tuberculosis from milk is almost abolished by its compulsory pasteurisation, but farmers and farm-labourers who obtain raw milk from their own herds should always boil it before use.

Leaving the subject of infection, but centinuing with the theme of avoidable illnesses, it is proved that there is some association between cigarette smoking and cancer of the lung. This is a risk which could very readily be avoided.

There are too many accidents to children and to old people in the homes. Children too frequently come in contact with unguarded fires, are scalded with boiling saucepans and kettles, with hot tea and with hot-water for washing. Dangerous tablets and medicines are left much too frequently within their reach.

Old people, with their brittle bones, have too many fractures from falls on slippery floors, over carpets, down steps and on steep, dark, staircases without hand-rails.

The care of the elderly demands more and more attention. They number one in nine of the population today and will become one in seven in another twenty years' time. With this increase in numbers there is a corresponding increase in the elderly who live alone and who are liable to become crippled, mentally enfeebled and bed-ridden. The Home Help service aids many elderly people to continue living at home. This is a valuable aspect of the service because elderly people in institutions lose their initiative and independence and tend to decline in health. Greater help from relatives and neighbours would be a service of great value to the elderly.

School examinations show that over ninety per cent of children require dental attention. Between one district and another there is an unfortunate variation in the number of acceptances for treatment. This is partly due to interruptions in treatment caused by shortages of the school dental staff and partly to a lack of interest by parents.

Defective speech is a severe handicap in life and speech therapy is most important for secondary school pupils, who through their attendance for speech training are liable to miss instruction for important examinations. It is in mentally backward children that the results of speech training are poorest.

Works managers and directors might think a little more about smoke prevention. I know how irritating it is to have an inspector calling to complain about a smoking chimney when business worries are pressing, but a clean atmosphere is just as important as clean food — and perhaps more so, because we have not discovered all the harmful effects of tar, sulphur dioxide and fluorine which pollute the atmosphere of industrial districts.

Before smokeless zones are formally introduced, the housewife can play her part by installing fireplaces which can burn smokeless fuels and by using these fuels at every opportunity.

Everyone has read about the dangers of accidents on the roads, the noise of traffic which goes on throughout the night to disturb the sleep of a large proportion of the population, the black smoke from diesel motors and the dust which drifts into the houses, but I have never seen mentioned the fact that a large number of elderly people suffer from visual and hearing defects which render them incapable of appreciating the rate of approach of fast-moving vehicles. Handicapped elderly persons and irresponsible children require more consideration than they get from drivers on the roads.

The main staffing problem in this area is in district midwives.

The proportion of births in maternity homes and hospitals is 40 per cent which is half the number in areas of the County most favourably equipped

with maternity beds. This district shows an increase in births instead of the fall which is common to other areas. With the help of the local Council, who provide houses, and with the assistance of the midwifery staff, who all willingly take over extra districts during times of emergency, the service is being maintained at a high level of efficiency, but I regret the shortage of midwives and the loss of trained midwives to other nursing services.

J. M. WATT

Medical Officer of Health

Council Offices, MALTBY, nr. Rotherham.

#### MALTBY URBAN DISTRICT COUNCIL

#### ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1957

#### GENERAL STATISTICS

Area in acres		 	 4,788
Population (estimated mid-	1957)	 	 13,940
Number of inhabited houses			
Rateable value at 1.4.57		 	 £96.755
Description of the second			£398.4s.8d.

#### EXTRACT FROM VITAL STATISTICS

#### Live Births

	MALES	FEMALES	TOTAL
Legitimate	160	127	287
Illegitimate	3	10	13
Totals	163	137	300

Crude birth-rate per 1,000 population: 21.5
Adjusted birth-rate per 1,000 population: 19.3
Comparability factor: .89

#### Stillbirths

Total stillbirths: 5
Rate per 1,000 live and stillbirths: 16.6
Rate per 1,000 population: .35

#### Deaths

Total deaths: 91 Crude rate per 1,000 population: 6.5 Adjusted rate per 1,000 population: 10.7 Comparability factor: 1.65

#### Infant Deaths (Under one year of age)

Total infant deaths: 8
Rate per 1,000 live births: 26.6

#### Maternal Deaths

There were no maternal deaths during 1957

#### Neo-Natal Mortality (Deaths of infants under four weeks of age)

Total deaths: 4
Rate per 1,000 live births: 13.3

BIRTH, MORTALITY AND INFECTIOUS DISEASES RATES FOR 1957

	Maltby_Urban District	West Riding Administrative County	England and Wales
Crude Birth Rate	21.5	16.6	16.1
Adjusted Birth Rate	19.2	16.7	16.1
Crude Death Rate	6.5	11.7	11.5
Adjusted Death Rate	10.7	12.7	11.5
Infective and Parasitic Disea exc. tuberculosis but includi syphilis and other V.D.		0.07	*
Tuberculosis, Respiratory	0.07	0.08	0.09
Tuberculosis, Other	_	0.01	0.01
Tuberculosis, All Forms	0.07	0.09	0.11
Cancer	0.86	1.87	2.09
Vascular Lesions of the Nervous System	1.22	1.95	*
Heart and Circulatory	2.44	4.30	*
Respiratory Diseases	0.79	1.37	*
Maternal Mortality	_	0.51	. 0.47
Infant Mortality	26.6	26.4	23.0
Neo-Natal Mortality	13.3	1,8.9	16.5
Stillbirth Rate	16.4	23.9	22.4
Infectious Diseases (Correcte	ea)		
Typhoid Fever	_	_	_
Paratyphoid Fever		0.00	0.01
Meningococcal Infection	0.008	0.04	0.02
Scarlet Fever	0.93	0.79	0.66
Whooping Cough	<b>-</b>	1.29	1.89
Diphtheria	_	_	
Erysipelas		0.11	0.08
Smallpox		V ₹ # #	-
Measles	9 <b>.</b> 5	17.46	14.11
Acute Poliomyelitis (including polioencephalitis) Paralytic		0.05	0.07
Non-paralytic	-	0.01	0.04
Acute Pneumonia	0.015	0.82	0.73
Dysentery	2.1	0.85	0.64

<sup>\*</sup>Figures not available

#### Population

The estimated mid-1957 population was 13,940 and showed an increase of 110 on the 1956 figure and 1,455 on the census total.

#### Births

The total recorded live births for 1957 was 300, an increase of 29 on the previous year. The crude birth-rate was 21.5 and the adjusted rate was 19.3 per thousand population. In addition, there were 5 stillbirths, giving a stillbirth rate of .35 per thousand population and 16.6 per thousand live and stillbirths.

#### Institutional Confinements

INSTITUTION	Number of Confinements
Moorgate General Hospital, Rotherham	90
Listerdale Maternity Home, Wickersley	26
Jessop Hospital, Sheffield	8
Kilton Hospital, Worksop	2
Western Hospital, Doncaster	1
Total	127

#### Midwifery duties carried out by the Maltby Midwives: -

	Confinements Attended	Total <u>Visits</u>
Mrs. E. Mozley	77	2,504
Mrs. S. J. G. Williams	69	2,082

#### Domiciliary and Institutional Births (Divisional Table)

		BIR	THS	!	
DETAILS	Domicil	iary	Instit	utional	TOTAL
	Live	Still	Live	Still	and the second s
Primary notifications received	1,065	19	581	12	1,677
Inward transfers	21	1	609	28	659
Total notifications received	1,086	20	1,190	40	2,336
Outward transfers	15	-	372	8	395
Total adjusted notifi- cations	1	20	818	32	1,941

### Analysis of Institutional Births

(Divisional figures)

		Live	Still
Born in (a) H (b) M (c) N	ospitals aternity Homes ursing Homes	571 209 <u>38</u>	28 4 —
	TOTAL	818	32

#### Domiciliary Births

Number of deliveries attended by midwives in the Division during 1957:-

#### Doctor not booked

Doctor	present	at t	ime (	of d	eli	very	 • • •		 20
Doctor	not pres	sent	at t	ime	of	delivery	• • •	• • •	 258

#### Doctor booked

Doctor present at time of deliv (either the booked doctor or ano	ery ther) .	• •		• • •	17.7
Doctor not present at time of d	elivery .	• •	• • •		613
	Total .			1,	068

16 cases were delivered by midwives from adjoining districts and by private midwives.

## Administration of Gas and Air Analgesia, etc. (Divisional Figures)

Cases attended by domiciliary midwives: -

,	Pethidine	printer also date distribution in plant of	nd Air	Tri	The state of the s
	Alone	Alone	With Pethidine	Alone	With Pethidine
		•			
When doctor was present	80	23	52	1	3
When doctor was not present	373	82	167	1	3

#### Medical Aid (Divisional Figures)

The General Practitioners were called to give medical aid at confinements or in connection with confinements, as analysed below, in 157 instances:-

Pregnancy		• • •		39
Labour	• • •			81
Lying-in				26
The Child			• • •	11

#### Dental Treatment of Expectant and Nursing Mothers

86 expectant and nursing mothers from the Maltby district received dental treatment under the County scheme during the year.

#### Ante-natal Clinic

148 women made 808 attendances at the Maltby Ante-natal Clinic during 1957.

#### Care of the Unmarried Mother and Her Child

46 cases were reported and dealt with in the Division during 1957.

16 mothers were under 20 years, 14 were in the 20 to 25 year group and 16 were over 25 years of age.

- 29 mothers kept their babies.
- 1 baby was adopted.
- l baby died.
- 2 babies were taken by the grandparents.
- l case was settled by marriage.
- 12 cases were not finally settled at the end of the year.

#### Care of Premature Babies

Three Sorrento cots were maintained at the Maltby Ambulance Depot for issue at the request of a doctor or midwife.

#### Health Visiting

The following visits were made by Health Visitors to children under five years of age in the Maltby district:-

Number of first visits paid to children under one year of age	285
Number of re-visits paid to children under one year of age	251
Total visits paid to children over one year of age	790
Total visits	1,326

#### Infant Welfare Clinic

505 children under five years of age made 4,413 attendances at the Maltby Infant Welfare Clinic during the year. 3,314 of these attendances were made by 352 children under one year of age.

#### Deaths

91 deaths were registered in the Maltby Urban District during the year; the death-rate (adjusted) being 10.7 per thousand population.

The main causes of death were:-

Heart and cir	oul ot omir	3:00	2000				21
	•						
Vascular lesi	ons of t	he ne	rvous	syst	em	 • • •	 17
Cancer	• • •					 • • •	 12
Respiratory d							
Violence						 	 3

#### Infant Deaths

There were 8 infant deaths in the Maltby area during 1957. This gave an infant death-rate of 26.6 per thousand live births.

Of the 8 children who died, 4 were under 4 weeks of age.

#### Infant Deaths (continued)

Trend of Infant Deaths Over the Past Ten Years

Year	Live Births	Infant Deaths	Infant Death Rates
1948 1949 1950 1951 1952 1953 1954 1955 1956	321 267 266 268 272 255 250 259 271 300	19 19 11 9 6 14 5 8 9	58 70 41 33 22 55 20 31 33 27

#### Infectious Diseases

Age distribution of infectious diseases notified during 1957:-

					Age	in	Yea	rs					
Disease	Under 1	l year	2 years	3 years	4 years	5 to 9 yrs.	10 to 14yrs.	15 to 24yrs.	25 to 44yrs.		65 yrs. &	Over Age Unknown	
Measles	4	21	13	18	25	50	1	_	-	-	-	1	133
Dysentery	3	_	3	3	4	16	1	-	_			-	30
Scarlet Fever	-	i	_	-	4	8	1	_	_	-	_	-	13
Pneumonia		-	o a superiorate y constraint of the superiorate y constraint o	_	-	-	-	-	1	1	-	-	2
Food Poisoning	-	-	1	-	_	-		-	_	1	-	-	2
Poliomyelitis (Paralytic)			-	_	1	-	-	-	-	<b>-</b> į			1
Meningococcal Infection	_		Andrews of the control of the contro			-			1		-		1

#### Tuberculosis

#### Maltby Urban District

	Pulmo	onary	Non-Puln	ulmonary	
	Males	Females	Males	Females	
Number of cases on register at 1st January, 1957	57	32	5	2	
Number of cases added during the year	8	6	-	-	
Number of cases removed during the year	2	3			
Number of cases on register at 31st December, 1957	63	35	5	2	

#### Influenza Epidemic

The first sign of the world-wide epidemic of Virus A. influenza was a trickle of cases during July and August. A sharp rise in cases at the beginning of September marked the start of the epidemic proper which climbed to its peak on 20th September and continued to the end of October when it ended as abruptly as it began.

The epidemic reduced school attendances to fifty per cent, increased sickness rates four times among employed persons and infected the majority of the population before it finished.

The usual influenza symptoms of headache, prostration, pains in the limbs and raised temperature were of moderate severity; the debility in convalescence cleared up after a fortnight.

Complications were not common and only 17 cases of pneumonia were notified in the Division (7 of these were admitted to hospital).

A group of 8 deaths was registered which is a modest total compared with the numbers recorded in quite small outbreaks during an average winter. Of these deaths, 5 were in persons over 65 years of age.

The striking features of this epidemic were, the new type influenza Virus A responsible, the complete lack of resistance to its spread, its onset during fine weather in early autumn, the small number of hospital admissions, the absence of any special demand for Home Nursing or Home Help assistance, the overwhelming demand for home visits from family doctors, the ability shown by infected families to fend for themselves.

After the epidemic ended a supply of Virus A (Asian Type) vaccine was received for administration to certain special groups, which included nurses and ambulance drivers. The number of reactions after these injections was very high and the absence of a second wave of influenza did not put the vaccine to any real test, but the chief hope in the future, as far as influenza is concerned, rests with the development of this vaccine.

#### Extra Nourishment for Tuberculosis Cases

Number of patients in the Division on 1st January, 1957		78
Number of patients in the Division during the year	granted extra nourishment	35
Number of grants discontinued	••• ••• ••• •••	36
Number of patients receiving extra 31st December, 1957		77

#### Tuberculosis - Care and After-Care

Two cases from this Division illustrate the working of the County Council's Scheme for the home care of tuberculosis patients:-

A young married woman with two children developed pulmonary tuberculosis and required prolonged treatment in bed at home. The Home Nurse visited on alternate days to give streptomycin injections and the County Ambulance conveyed the patient once each week to the Chest Clinic for surgical treatment.

Family contacts were given appointments at the Chest Clinic for X-rays and tuberculin tests. One child was admitted to the sanatorium after examination and the other was given B.C.G. vaccination.

When the housing circumstances of the family had been considered by a joint meeting of the Chest Physician, Public Health Inspector,

#### Tuberculosis - Care and After-Care (continued)

Tuberculosis Visitor, Housing Manager and myself, the local Council was asked to give the family a new Council house and did so.

Throughout the mother's illness a Home Help attended daily to clean the house, light fires, prepare meals, make beds and attend to the family shopping.

Two pints of milk were supplied to the patient each day under the County Council Scheme; she was kept supplied with sputum cartons and, in convalescence, was given a marquetry set to occupy her time.

All this attention was given to good purpose because at the end of the year the patient was well on the way to recovery.

The second case was a young married man who had suffered several years of incapacity from tuberculosis. When he had completed sanatorium treatment and had been re-housed, he was found employment as a car park attendant by the Rotherham Tuberculosis Care Committee. This Committee receives an annual grant from the County Council and provides light work, under healthy conditions, for patients who have been ill for long periods. Patients seem to find little difficulty in progressing to better-paid jobs from these car parks and they provide a most useful scheme of rehabilitation.

#### Immunisations and Vaccinations

(Maltby Urban District)	Protective	Refresher
Number of children immunised against diphtheria	58	-
Number of children immunised against whooping cough	47	<u>-</u>
Number of persons vaccinated against smallpox	57	3

#### Poliomyelitis Vaccination

During 1957 2,442 children in the Division were vaccinated against poliomyelitis.

#### B.C.G. Vaccination

No B.C.G. vaccinations were carried out during 1957 in the schools.

#### Tuberculin Test Twelve Months After Vaccination

Number	vaccinated	in 1956		• • • •	• • •	• • •	• • •	• • •	• • •	607
Number	tuberculin	tested	twelve	months	after	vacc	inati	ion	• • •	288
Result	of test:-									

Positive	• • •	• • •	 211
Negative	• • •	• • •	 75
Not ascertained	• • •		 2

#### B.C.G. Vaccination - Contact Scheme

Details of B.C.G. vaccination of contacts carried out by Chest Physician: -

						AGI	E GR	OUPS						All
		0 <b>–</b>	nder Mont	l yea hs	ar 6-	1-	2-	3 <b>–</b> :	Yea 4-	rs 5-	10-	15_	20-	Ages
		0-			0-			<u> </u>	4-	<u></u>	10	+)-	LO	
Vaccinated Male	• • •	7		3	1.	1	1	1		3	5	1	_	23
Female	• • 0	4	3	2	2	3		_	2	5	1	2	_	24
[ Total	:	11	3	5	3	4	1	1	2	8	6	3		47
Result of Vaccinati Successful										,				
Male	• • •	5	_	3	1	1	1	1		3	5	1	_	21
Female	• • •	4	2	2	2	3	_	_	2	5	1	2	_	23
Total	0 • •	9	2	5	3	4	1	1	2	8	6	3	-	44
Not finally ascertained	T - Administration of the Control of	2m	. lf		_	The state of the s		_		_	district of the control of the contr	-	-	3

(Divisional report except where stated)

96

#### SCHOOL HEALTH SERVICE

#### Medical Inspections

Number of pupils who were medically examined during 1957:-

School entrants	 		1,156
7 to 8 year old pupils	 		792
Last year primary pupils	 		685
First year secondary pupils	 • • •	• • •	734
Last year secondary pupils	 • • •		1,217
TOTAL	 • • •		4.584

Number of children examined at special inspections: 1,714

Number of children examined at re-inspections:

#### Classification of the Physical Condition of Pupils Examined

Age Groups Inspected	Number of Pupils	Sati	sfactory	Unsatisfactory		
	Inspected	Number	% of Col.	Number	% of Col.	
Entrants	1,156	1,144	99.0	12	1.03	
7 to 8 year group	792	779	98.3	13	1.06	
Last year primary	685	667	97.3	18	2.06	
First year secondary	734	728	99.1	6	.08	
Last year secondary	1,217	1,203	98.8	14	1.01	
TOTAL	4 <b>,</b> 584	4,521	98.6	63	1.3	

#### Cleanliness of School Children

Total number of children seen at cleansing surveys: 12,999

Number found to be infested with vermin: 568

#### Diseases of the Skin

Number of children treated during the year:-

Impetigo: 18 Other skin diseases: 38

#### Minor Ailments Clinics

Number of children treated during the year: 2,118

#### SPECIALIST CLINICS - Maltby figures

#### Ophthalmic Clinic

Number of children seen at the Ophthalmic Clinic ... ... 308 Glasses were prescribed for 193 children.

#### Ear, Nose and Throat Clinic

Number of children seen at the Ear, Nose & Throat Clinic ... 41
13 children were referred for operative treatment.

#### Orthopaedic Clinic

Number of children seen at the Orthopaedic Clinic: -

School chi	ildren	. 17
Pre-school	children	19

#### Paediatric Clinic

Number of children seen at the Paediatric Clinic ... 41

#### Child Guidance Clinic

Number of children seen at the Child Guidance Clinic ... 6

Speech Therapy Clinic

Number of children treated at the Maltby Clinic ... ... 34

Defects of articulation ... ... 19
Stammering ... ... 13
Defective speech ... ... 2

#### Ultra-Violet Light Treatment

14 sessions were held during 1957 in the Division at which

12 children made 80 attendances.

#### Medical Examination of Entrants to Training Colleges

51 candidates were examined prior to admission to Training Colleges.

#### Children & Young Persons Act, 1933 (Employment of Children)

129 children were examined during 1957 to ascertain their fitness for employment (including entertainments).

#### HOME NURSING

Analysis of cases and visits:-

	Number of cases attended by Home Nurses	Number of visits paid by Home Nurses
Medical Surgical Infectious Diseases Tuberculosis Maternal complications Totals	1,432 430 1 34 21 1,918	41;526 9,002 39 6,183 270 57,020
Patients included in above who were 65 years or over at the time of the first visit	615	29,152
Children under 5 years of age included in the above	159	1,943
Patients included in the above who had more than 24 visits during the year	165	11,222

#### HOME HELP SERVICE

Number of Domestic Helps employed at 31.12.57 ... 62

Number of cases provided with help during 1957:-

		Number of Cases	Hours Employed
Maternity (inc	luding expectant mothers)	134	14,017
Tuberculosis		9	1,481
Chronic sick:	65 years of age & Under 65 years of		48,937 6,141
Others		44	8,138
	Total	440	78,714

The supervision of Home Helps was carried out in the main by two Assistant Health Visitors who made 6,967 visits during the year.

#### AMBULANCE SERVICE

The following figures were provided by the County Ambulance Officer:-

#### Vehicles available:-

Maltby		Kiveton Park
•		
3 ambulances	1	ambulance
l ambulance sitting bus		

Number and analysis of cases conveyed by ambulance: -

		Maltby .	Kiveton Park
Stretcher cases Sitting cases	• • • • •	2;783 11,760	75 <u>4,474</u>
Admissions Discharges Transfers Out-Patients Accidents		1,700 979 70 11,446 348	58 159 4,328 4
Total number of	patients	14,543	4,549

#### GROUP TRAINING CLASSES

Number of patients who attended the Group Training Classes held at the Maltby Child Welfare Centre during 1957:-

	Under	16 years	Over 16	years
	Males	Females	Males	Females
	5	. 6	3	3
Total attendances made	91	342	218	162

Plans were well advanced by December, 1957 for the opening of an Occupation Centre and the consequent closure of Group Training Classes.

#### Mental Health Service

The Mental Health Social Worker, Miss Ball, had her area reduced and was able to devote all her time to the 180 cases on the register for this Division.

Miss Ball made supervisory visits to the homes and also supplied reports to the staffs of mental hospitals upon the home circumstances of their patients.

#### Children Neglected or Ill-treated in their Own Homes

Neglect of children is not always caused maliciously or from indifference and occasionally cases occur in which the parents are overwhelmed by unfortunate circumstances.

An example of this was a case reported of a mother who had a severe and prolonged illness which resulted in her home becoming filthy and in the two children being neglected. The father was working long hours and was unable to cope with the many problems which arose, including the appearance of one child at the Juvenile Court and complaints from the Education Department about frequent absences from school.

When the children had been removed to a Children's Home; the Health Visitor arranged for a Home Help to clean up the house, contacted the family doctor and arranged for the mother's admission to hospital.

As a result of these efforts the home was re-established on a proper basis.

During 1957 a meeting of the Co-ordinating Committee for the care of children neglected or ill-treated in their own homes was held at the Maltby Child Welfare Centre at which cases from the Maltby district were discussed.

#### Nuisance Inspections

Total number of inspections made for nuisances only				188
Informal notices served for abatement of nuisances	• • •			83
" complied with		• • •	• • •	83
Statutory notices served for abatement of nuisances				_
" complied with	• • •	• • •	• • •	
Number of summonses or other legal proceedings		• • •		***

Amongst a wide variety of nuisances investigated were two interesting insect infestations. The first occurred in May and involved the biting midge, Culiciodes pulicaris, which caused discomfort (extreme in cases) to residents in widely scattered parts of the township. Investigation proved that the source of trouble was the sewage sludge at the Wood Lea works and the silted-up stream below the works. Disinfestation work and 'dredging' of the stream were carried out and the nuisance abated.

The second infestation occurred in two houses on Cliff Hill estate in November. A swarm of insects invaded the houses on an evening in substantial numbers. They proved to be the Scopeuma stercorarium (commonly known as the Dung Fly) which had, in all probability, been carried from their habitat by the high wind prevailing at the time. Spray treatment killed the insects and no re-infestation occurred.

#### Sanitary Inspections and Visits

Total number made during the year ... ... ... 572

(Note - these do not include visits under the Milk (Special Designations) Regulations; Shops Acts; Sec. 16 of the Food & Drugs Act, 1955; Prevention of Damage by Pests Act, 1949; or housing inspections).

#### Drainage and Sewerage

Of the 3,887 dwelling houses in the district only 80 were not connected to sewers - these being in the rural part of the area. Nevertheless, 58 of these latter houses have water-closets which are connected to septic tanks, cesspools or small disposal plants.

#### Closet Accommodation

Number	of	dwelling houses having one water-closet	3,289
11	11	" more than one water closet	576
tt	Ħ	water-closets constructed for new houses	9
11	11	additional water-closets constructed for old property	2
Percen	tag	of closets on water carriage system	99.4

The following table shows the number and type of closets in use in the area: -

	Water Closets	Pail Closets	Chemical Closets	Total
Dwelling houses Factories Shops Hotels & public hous Business premises Public conveniences Schools Other premises	4,455 208 61 es 47 29 5 154 201	21	1 4 - - 4 -	4,477 212 61 47 29 9 154 201
Totals	5,160	21	_9	5,190

#### Water Supply

The area's two sources of supply are (a) reservoir belonging to Sheffield Corporation, and (b) borehole at Austerfield belonging to Don Valley Water Board, of which our Authority is a constituent member.

Number	of dwell	dwelling houses in the district ing houses on public supply not on public supply	• • •	• • •	3,887 3,885 2
Samples	taken -	bacteriological - satisfactory			8
11	11	" - unsatisfactory			
11	11	chemical - satisfactory		• • •	4
11		" - unsatisfactory			_
11		plumbo-solvency - satisfactory	• • •		4
11	11 _	" - unsatisfactory	• • •		-

A somewhat worrying feature of the periodic chemical examination reports is the high degree of hardness in the Don Valley supply. The domestic consumer is faced with a combination of reduced supply through 'furring' of circulation pipes, deposition of lime salts on utensils such as kettles, and extra demands on soap and detergents for household hygiene. The problem confronting the property owner is one of additional expense in connection with replacement of 'furred' circulation pipes and back boilers; although the increasing use of 'acid flushing' to remove scale (Particularly in Council and Ministry of Supply properties) has somewhat reduced this expense and the need for major plumbing repairs. Nevertheless, whilst realising the difficulties, both financial and technical, one cannot feel that the problem could be greatly reduced at the source of supply to the benefit of all sides of the community.

Details of the Public Analyst's report upon the four samples of water taken for chemical examination were as follows:-

•	A CONTRACTOR OF THE PERSON NAMED IN COLUMN 1	field (b)	Don Va	lley (b)
Physical Characters	(a)	(0)	(a)	(0)
Suspended matter Appearance of column 2 ft. long	None Clear; very faintly yellow	None Cl <b>ear</b> Colourless	None Clear Colour	None Clear less
Taste	Nor Non	- · · · ·	Norm None	
Chemical Examination	- 0	Parts per		
Total solids dried at 180°C Chlorides in terms of Chlorine Equivalent to Sodium Chloride Nitrites Nitrates as Nitrogen Poisonous Metals (Lead, etc.) Total hardness Temporary hardness Permanent hardness Oxygen absorbed in 4 hrs. at 80°F.	84.0 10.5 17.3 None 0.75 None 40.0 13.0 27.0	84.0 10.0 16.5 None 0.50 None 41.0 13.0 28.0	240.0 20.0 33.0 None 5.5 None 190.0 144.0 46.0	242.0 20.0 33.0 None 4.0 None 193.0 147.0 46.0
Ammoniacal Nitrogen Albuminoid Nitrogen Free Chlorine pH value	0.018 0.024 None 7.6	0.020 0.040 None 7.3	0.006 0.008 None 7.6	0.004 0.016 None 7.8
Milk Supply				

11

Samples taken for analysis under Food & Drugs Act

found to be adulterated

Number of prosecutions

Number of milk retailers registered

	CCUI	.1100 108	51500104	Alcor In	.111 0 100.	1949/5		• • •	5 ,
OR AND PROPERTY OF A PERSON NAMED IN COLUMN 1 IS NOT THE PERSON NA		cial Des 1949/53	signations	s) (Past	eurised	& Steri]	lised M	Milk)	
						Dealers	<u> </u>	Supple	mentary
Number	of lic	ences in	n force fo	)r:-					
(a) Pa (b) St	steuris erilise	ed milk	• • •	• • • • •		5 19			7 6
Number	of sam	ples of	milk obta	ained:-	Sa	atisfacto	ory	Unsati	sfactory
(a) Tu (b) Pa (c) St	berculi steuris erilise	n Tested ed (not ed (not i	l Pasteuri including including	sed g T.T.) T.T.)	•	10 10 9		•	- -
Number	of ins	pections	s made at	premise	es of lie	censecs	• • •	• • •	54
The Mi	lk (Spe	cial Des	signations	c) (Raw	Milk) R	egulation	ns, 194	19 & 19	50
		ences ir in Teste	n force fo	)r:-		Dealers 5	<u> </u>		mentary
Sample	s of mi	.lk obtai	ined – Tuk	erculir	Tested	ŕ	• • •	• • •	
			s made at				• • •	• • •	12
ce Cream									
Premis	ses regi	stered i	under Sec.	.16 Food	& Drug	s Act, 19	955 for	r;	
(b) Ma	nufactu	re of i	of ice creem sale of ic	• •				• • •	32 - -
Inspec	tions m	ade of s	such premi	ises		• • • • • •	• • •	• • •	118
Sample	s taken "" "	for bac " "	cteriologi " "	ical exa	mination "" ""	n - Grade - " - "	2 3 4	• • •	27 7 2 6
۸۶۶ -			• •			.7	- C - L -	-C-2	

dairies registered under Milk & Dairies Regulations

27

All ice cream in shops is pre-packed; and only two of the firms operating from vans in the area are retailing the 'loose' product. However, even in these two cases the ice cream is heat treated.

In view of the absence of manufacturers in Maltby, the follow-up action on Grade 4 samples is done more or less by 'remote control' - i.e. discussions by telephone or letter with the manufacturer and the public health inspector in whose area the ice cream is made. Although it is usual to base judgement on a series of samples, rather than single samples alone, I do feel that informal action on each Grade 4 sample serves to keep manufacturers 'alerted'; and, generally speaking, I find that they themselves are ready to investigate even the slightest fault which may be causing reduction in the quality of their product.

Despite the greatest care taken by manufacturers to market a pure and hygienic product, contamination can still occur during retail sale - particularly with 'loose' ice cream when servers, etc., are used. Even though vans are equipped with portable washing and cleansing facilities, it is of the utmost importance to ensure that employees make the fullest use of the facilities afforded. Expenditure on costly processing plant counts for little if the lack of personal hygiene on the part of those

#### Ice Cream (continued)

effecting final retail sale results in a lowering in the required standard of the product. In fact, it is now a case of "Here are the tools - finish the job!"

The pre-packing of ice cream is indeed a blessing; but it still creates a problem - the disposal of the wrappings. Retailers co-operate by providing special receptacles and even encouraging customers to utilise them; yet there is still an abundance of wrappers to be seen on the pavements, often within a very short distance of the receptacles provided. Surely, if efforts have been made to give the public a pure product, it cannot be too much to ask of the purchaser to make his contribution to the cause of hygiene and cleanliness by disposing of the unwanted wrapping - the actual safeguard - in a proper manner!

#### Iced Lollipops

Samples taken for bacteriological examination - satisfactory ... 17
" " unsatisfactory -

Although all the premises registered for the sale of ice cream are also retailing lollipops, only four are actually manufacturing them - either freezing mineral water or a mixture of water and a specially prepared commercial compound. Even so, in each of these cases, the 'home made' product is only a minor supplement to stocks of wrapped lollipops supplied by reputable ice cream manufacturers.

#### Meat and Food Inspection

Number of surrenders of unsound food ... ... 24

The following is a schedule of foodstuffs which were surrendered and subsequently destroyed:-

<u>Item</u>	<u>Tins</u>	C.	Q.	lbs.	ozs.
Canned meats  " vegetables  " fruit  " milk  " fish  " fruit juice  " soup  Cheese Flour Sausage Ham Pies Ground rice Swiss rolls Desiccated coconut	39 81 74 38 14 9 7	1 2	1 3 3 2 0 1	17 16 8 21 4 8 6 14 24 17 6 4 1	9 <sup>1</sup> / <sub>2</sub> 3 <sup>1</sup> / <sub>2</sub> 12 0 <sup>1</sup> / <sub>2</sub> 11 4 11 <sup>1</sup> / <sub>2</sub> 8 0 8 0 0 8 12
	Total	7	3	12	8

The unusually large quantity of flour involved was affected by sulphur dioxide fumes which were liberated in a storage room when a leak developed in the refrigerator plant.

It is general practice for small quantities of unsound food to be disposed of at the Council's refuse tip and for bulk consignments by incineration.

#### Food Premises

Number of bakehouses in use in the district ... ... 2

Number of underground bakehouses ... ... ... ... 1

(partly)

Inspections made of bakehouses ... ... 19

#### Food Premises (continued)

Premises registered under Sec. 16, Food & Drugs Act, 1955 for: -

(a) Pr (b)	epa	ration (	or manu	facture	∍ of ∥	saus frie	sages, ed fis	, pres sh and	chip	meat ped otato		. 12
11	11	indust: school cafes	rial cai canteei			• • •	• • •	• • •	• • •	• • •	• • •	5 5 3
tt	tt	visits	to all	types	of	food	prepa	aring	premi	ses	• • •	257

Types of shops and visits made thereto: -

	Shops	Visits
Grocer/greengrocer/general dealer Greengrocer/fish Greengrocer Fish (wet and fried) Butcher Confectionery/fried fish Confectionery	4 	285 9 29 71 134 6 6
Chemist Sweets  Total number of food shops and vis		7 <u>14</u> 561

#### The Food Hygiene Regulations, 1955

When these Regulations came into operation in 1956, a great deal of time had, of necessity, to be spent in giving advice on the requirements and interpretation of same; and, in particular, to ensuring that the necessary wash-basis, sinks, geysers or immersion heaters, "wash your hands" notices and accommodation for outdoor clothing were provided in the various food establishments. Having secured these, one was able in 1957 to not only see that these facilities were used, but to devote more time to ensuring that other aspects of the Regulations were being observed and so safeguarding the community against hazards contained in the food it eats. Generally speaking, the co-operation from shopkeepers has been very good, but the frequent changes in personnel of shop staffs do not make it any easier from the point of view of the management or inspectorate. It means that new employees have to be taught the elements of hygiene and made to realise the important part which their personal conduct and cleanliness plays in the unceasing campaign for clean food.

Much time was devoted to the inspection of food shops and stalls in the privately-owned market. Extra toilet facilities and fixed wash-basins with hot water were provided during the year, but the siting and construction of several stalls and shops leaves much to be desired. The re-planning hoped for did not materialise because of the delay in the construction of the new fire station. However, now that the latter is well on its way towards completion, I am hoping that 1958 will see at least a commencement on a 'new look' market.

Food vans appear to be on the increase, and a fair amount of success has been achieved in securing the implementation of the Regulations so far as these vehicles are concerned. The registration of hawkers under Sec.76 of the West Riding County Council (General Powers) Act, 1951, enables us to keep a fairly tight check on this class of person. Nevertheless, one still sees bread and confectionery van doors open for too long, washing units with water that is barely tepid, towels not changed often enough, and personnel who seem reluctant to make full and proper use of the facilities at their disposal.

#### The Food Hygiene Regulations, 1955 (continued)

However, not all the faults always lie with the trade; for one can still see customers who, by their own poor habits, are undoing the good work of the manufacturer, shop staff, food handler and Public Health Inspector, and proving that the customer is not always right. The strength of a chain lies in its weakest link, and it would be a pity if the chain of food hygiene, so painstakingly forged, is unwittingly broken in its final stages. We must have the backing of the general public whose safety the Regulations seek to secure; and effective administration must be combined with constant educational activity.

#### Shops Act, 1950 - Secs. 38 & 71

Number	of	visits paid und	der the above	re Act	• • •	 257
		unsatisfactory				
		11				

#### Factories Acts, 1937 & 1948

where Secs. inspections		-	3 11
ories in whi			
Unsuitable o			

#### Tents, Vans & Sheds

Although there were no permanent vans in the area during the year, there were a few occasions when itinerant van dwellers took up 'temporary residence' in Outgang Lane. However, in accordance with usual practice, the vans were removed with the minimum amount of delay; the local police affording co-operation where necessary.

#### Rodent Control

Properties inspected (i.e. complaint, surv	vey or otherwise) 76	2
Number of infestations dealt with	4	1
Properties involved in the above infestati	lons 3	8

In addition to the above, a 10% sewer test bait was carried out. Owing to the occurrence of 'takes' in one part of the area, a full maintenance treatment was necessary.

#### West Riding County Council (General Powers) Act, 1951

Number of registered hawkers of food	45
Number of registered storage premises for hawkers of food	
Number of visits paid to such premises	
Number of registered hairdressers	
Number of visits paid to hairdressing establishments	
Number of notices served under Sec. 53 (to remedy stopped-	up 27
	drains)

#### Pet Animals Act, 1951

Two renewal licences were granted during the year.

#### Sanitary Arrangements in Schools

Maltby can be justifiably proud of its excellent schools and, with one exception, of its sanitary and kitchen arrangements. One block of toilets was effectively improved during the year and arrangements made for extension and improvement at another school.

#### Sanitary Arrangements in Schools (continued)

When visiting the schools the one thing which perturbs me is the use of roller towels. Although these are changed twice, and in some instances three times per week, one has to see to believe the condition in which these towels get. Even so, the amount of dirt on a towel is not as important to my mind as the possibility of spread of infection of the common cold and skin and other diseases by the use of communal It seems singular that with odd exceptions the use of individual towels is restricted to infants, and only then if they stay at school for dinner; yet, immediately there is an outbreak of dysentery a supply of paper towels is rushed to the school concerned. Surely, it is better to take steps to prevent or minimise the spread of any infection rather than have to wait until it arrives! Whilst paper towels are better than communal roller towels, I realise that two important factors must be considered. Firstly, there is the question of storage and the disposal of used towels; and secondly, the question of comparative costs. Nevertheless, I would personally prefer to see towel dispensing machines installed, whereby each child is using a clean length of towelling on each occasion. Here again, cost has inevitably to be considered; although I am a firm believer that expenditure on health safeguards is money well spent.

#### Atmospheric Pollution

A further year's readings from the smoke filter apparatus in my office were duly tabulated and forwarded, through the County Medical Officer, to the Department of Industrial and Scientific Research.

Number of dwelling houses in the district

#### Housing Statistics

" back-to-back houses included in the above	-
Inspection of Dwelling Houses during the year	,
Number inspected for housing defects (under Housing or Public Health Acts)	183
Inspections made for the purpose (including re-inspections)  Number inspected and recorded under Housing Consolidated	596
Regulations	-
Inspections made for the purpose  Number considered to be unfit for human habitation  Number found not to be in all respects fit for human	-
habitation	148
Remedy of Defects without service of Formal Notice	
Number of defective houses so rendered fit  Number in which defects were remedied as a result of	-
informal actic (including 18	from
Proceedings under Housing Acts, 1936 & 1957	1956)

3.887

regarding repairs

### Proceedings under Public Health Acts

Houses in respect of which notices were served requiring remedying of defects 12

Houses in which defects were remedied after service of formal

Houses in respect of which formal notices were served

									HOLL	;e : <del>-</del>	*
(a)	By	owners	• • •							13	
(b)	By	Local	Authority	in	default	of	owner	ຮ	• • •	_	

<sup>\*</sup>Figure includes 3 from 1956.

#### Proceedings under Housing Acts, 1936 & 1957 (Demolition Orders)

Representations made in respect of houses unfit for human habitation

Dwelling houses in respect of which Demolition Orders were made

" demolished in pursuance of Demolition Orders

" " agreement by owner 2

Proceedings under Housing Acts, etc. re Closing Orders & Clearance Areas

No such action taken in either case.

#### Provision of New Houses during the year

Numbe	r provided	by the Local Authority			-
11	***	" private enterprise (permanent type)			8
Total	number of	Council houses in Maltby	• • •	• • •	1,641

\*Figure includes 14 properties acquired by the Council in 1957.

Over the past 3 years the Council have purchased some 68 private houses, and of these 15 have already been modernised, and work is steadily proceeding on the others. It is proposed to install electricity in the whole of these houses and, at the time of compilation of this report, only 9 houses remained to be done.

#### Housing Repairs & Rents Act, 1954 and Rent Act, 1957

6
7
.0
2 7 9 1

Experience in the working of this Act has convinced me that, had it not been for the overburdening of the already depleted inspectorate of many local authorities, the most practical procedure would have been to insist on owners and agents securing a Cortificate of Fitness from local authorities before being allowed to increase rents in those cases where landlord and tenant failed to agree. Scrutiny of completed G Forms has shown the extreme difficulty which many tenants have experienced in listing and classifying the necessary repairs and in deciding what they could legitimately request. Many owners have interpreted the Act in the spirit in which it was intended and have acted accordingly; but a few have demanded their 'pound of flesh' and, in return, have done the minimum amount of repair work and taken full advantage of any loopholes in the Act and of any shortcomings of the tenants. My own view is that, apart from the repairs side, owners should within a reasonable period have been expected to provide modern amenities such as hot water, electricity, etc. Apart from owner/occupiers, the improvement grant scheme has not 'caught on.'

One good feature arising from the Act has been that it has induced many tenants to purchase their own houses, rather than pay the new rentals. Many I know have been able to do this at a figure on a par and, in some cases, less than the new rental. I must admit, however, that a few of the

less enlightened tenants have not realised the full responsibilities attaching to ownership. This is evidenced by the number of persons who have expected drains to be cleared or repaired by the Authority as a normal service, and by the surprise created at the receipt of rate demand notes.

#### Public Cleansing

Once again the weekly refuse collection service was maintained, with additional collections from the schools and certain business premises.

Despite this weekly service, and the offer to the general public of free collection of bulk refuse, etc. (i.e. old bedding, furniture, etc.), it is most disconcerting to find that there are still members of the community, lacking in public spirit and civic pride, who are content to secretly deposit unwanted material on open spaces in the township. Such needless and thoughtless action is detrimental, from an aesthetic standpoint, to the standing of the township and also its progressive outlook. I can only hope that the few offenders will ultimately realise their shortcomings and cease this lamentable practice.

Salvage operations continued during the year, although on a reduced scale. The general instability of the market has caused certain headaches, particularly in relation to recovery of loose scrap time. Despite being urged to step up recovery, there was difficulty in disposing of same, even with the backing of the Joint Scrap Survey District Committee. I appreciate that it is beneficial to extract such material from the tip, but at the same time one must be able to dispose of same. Then again, with extra labour employed for sorting, one must try to make the operation as economic as possible and not an undue burden on the finances of the service as a whole.

#### Mortuary

During the year nineteen bodies were received into the mortuary - eight of which were from outside the Urban District of Maltby.

# CLINICS HELD AT THE NURSERY HUT, WALTERS ROAD, MALTBY (July, 1958)

CLINIC	Day and Time	Doctor Attending
INFANT WELFARE CLINIC	Mondays 2 to 4.30 p.m.	Dr. M. J. Hallinan
ANTE-NATAL CLINIC	Wednesdays 9.30 a.m. to 12.30 p.m. and 2 to 4 p.m.	-do-
SCHOOL CLINIC	Fourth Tuesday morning in the month	-do-
INOCULATION CLINIC	Third Tuesday morning in the month	-do-

#### SPEECH THERAPY CLASS

Day and Time	Person in Charge
Thursdays - all day	Miss H. M. Sherwood

## MIDWIVES, HOME NURSES AND HEALTH VISITORS - MALTBY AREA (July, 1958)

Name and Address	Telephone Number
MIDWIVES	
Mrs. E. MOZLEY	Nr_7 +1 70
4 Rosston Road, Maltby	Maltby 78
Mrs. S. J. G. WILLIAMS 14 Beech Road, Maltby	Maltby 115
HOME NURSES	
Mrs. D. COOPER  36 Maple Avenue, Maltby	Maltby 140
Mrs. M. E. PARKIN	
13 Holly Tree Avenue, Maltby	Maltby 2277
HEALTH VISITORS	
	•
Mrs. E. ELLIS	Maithr 201
32 Addison Road, Maltby	Maltby 201
Mrs. O. H. BERGER 73 Hill Top Lane, Kimberworth, Rotherham	ganh



